

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

### 1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name <u>Focus on the Family Action</u>		2. FEC Identification Number <u>090008186</u>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <u>8655 Explorer Dr.</u>		
(c) City, State and ZIP Code <u>Colorado Springs, CO 80920</u>		
(d) Name of Employer or Principal Place of Business	(e) Occupation	

3. Is This Statement <input type="checkbox"/> New or <input checked="" type="checkbox"/> Amended	4. Covering Period from <u>10/27/2004</u> through <u>11/06/2006</u>
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5. (a) Date of Public Distribution(s) 10/27/2004 (b) Communication Title Senate Race Ads

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.107? Yes  No

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes  No

### 8. Custodian of Records

(a) Name <u>Wade Crow</u>	
(b) Address (number and street) <u>8655 Explorer Dr.</u>	
(c) City, State and ZIP Code <u>Colorado Springs, CO 80920</u>	
(d) Name of Employer or Principal Place of Business <u>Focus on the Family Action</u>	(e) Occupation <u>CFO</u>

9. Total Donations This Statement 0.00

10. Total Disbursements/Obligations This Statement 63,396.54

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Peter Brandt

SIGNATURE [Signature] DATE 11/2/06

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

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